

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Daniel | | 08-08-01 |
| O.I.P.E. CLASSIFIER | | 10 | 8-15-01 |
| FORMALITY REVIEW | CC | 54114 | 9-7-01 |
| RESPONSE FORMALITY REVIEW | CC | 1114 | 03-11-02 |
| | HC | 712 | 03-19-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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56-571
3/14/02
3/14/02

851
03/11/02